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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 09/853,156
Applicant : Rui Wang et al
Filed : May 11, 2001
TC/A.U. : 2637
Examiner : Guillermo Munoz

Docket No. : 13669
Customer No. : 000293

Confirmation No. 6003

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Technology Center 2600

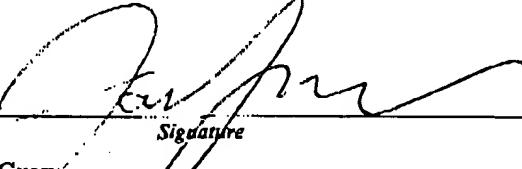
Commissioner for Patents
Alexandria, VA 22313-1450
U.S.A.

Dear Sir:

In response to the Office action of August 4, 2004, please amend this application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 13669	
Applicant(s): RUI WANG, ET AL						
Application No. 09/853,156	Filing Date May 11, 2001	Examiner Guillermo Munoz	Customer No. 000293	Group Art Unit 2637	Confirmation No. 6003	
Invention: CELLULAR COMMUNICATIONS SYSTEM RECEIVERS						RECEIVED NOV 04 2004
COMMISSIONER FOR PATENTS:						Technology Center 2600
<p>Transmitted herewith is an amendment in the above-identified application.</p> <p>The fee has been calculated and is transmitted as shown below.</p>						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	19 -	20 =	0	x \$18.00	\$0.00	
INDEP. CLAIMS	2 -	3 =	0	x \$88.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$0.00
<p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</p> <p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 19-2550</p> <p><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p> <p><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038.</p>						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 <i>Signature</i> James McGraw Registration No. 28,168						
Dated: November 3, 2004						
<div style="border: 1px solid black; padding: 5px;"> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____</p> <p style="text-align: center;">(Date)</p> </div>						
<i>Signature of Person Mailing Correspondence</i>						
<i>Typed or Printed Name of Person Mailing Correspondence</i>						

CC: